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Appendix 5 Wisconsin Medicaid Covered Dental Services

This table should be used as a *general* guideline. For specific procedure codes and limitations, please see Appendices 9 through 19 of this handbook.

COVERED SERVICES	LIMITATIONS	NONCOVERED SERVICES
<i>Diagnostic Services:</i>		
Exams	-Two times a year (ages 1-12 years) -One time a year (ages 13 yrs. and over)	
Most X-rays	-Limits on frequency and type	
Office visit		-Not covered separately, provider should bill for treatment
<i>Preventive Services:</i>		
Cleanings (Prophylaxis)	-Two times a year (ages 1-12 yrs.) -One time a year (ages 13 yrs. and over) -Fluoride treatment for children without prior authorization	
Sealants	-Prior authorization required for some teeth -One time every three years	
Space Maintainer	-For children only, prior authorization required for ages 13-20	
<i>Restorative Services:</i>		
Fillings	-One time a year for baby teeth, if needed -One time every three years for permanent teeth, if needed	
Crowns	-Prefabricated stainless steel crowns -Other prefabricated crowns for front teeth -Prior authorization required for adults for non-stainless steel prefabricated crowns for front teeth	-Single unit crowns, not prefabricated
<i>Endodontic Services:</i>		
Anterior, Bicuspid Root Canals	-Adults require prior authorization -Only covered if good oral health, good attendance record, few missing teeth	
Molar Root Canals	-Prior authorization required for everyone -Only covered if good oral health, good attendance record, few missing teeth	

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<i>Periodontal Services:</i>		
Gingivectomy	-Prior authorization required	-Osseous surgery and all other adjunctive periodontal services
Scaling and Planing	-Prior authorization required	-Osseous surgery and all other adjunctive periodontal services
Full-mouth debridement	-Prior authorization required	-Osseous surgery and all other adjunctive periodontal services
Periodontal maintenance procedure	-Prior authorization required	-Osseous surgery and all other adjunctive periodontal services
<i>Dentures-Bridges:</i>		
Partial Dentures	-Require prior authorization -Covered only if good oral health and specific teeth missing -Six-week healing period after extraction -Only resin base partials -Replacement once per five years, if needed	-Cast metal base partial dentures
Full Dentures	-Prior authorization required -Replacements only once per five years, if needed -Six-week healing period after extraction	-Duplicate, overlay, cu-sil dentures
Denture Reline	-Prior authorization required -Only once per three years	
Denture Repair	-Limited reimbursement for repair -Repair only if denture is repairable	
Bridges	-Fixed bridge requires prior authorization -Fixed bridge coverage extremely limited	
<i>Oral Surgery:</i>		
Tooth Extraction	-Surgical tooth removal covered only in medical emergency	-Surgical tooth removal without emergency conditions
Oral Surgeries	-Some require prior authorization	-Alveoplasty, vestibuloplasty, and osteoplasty after age 20
TMJ Surgery	-Covered only if non-surgical treatment was unsuccessful	-Non-surgical treatment of TMJ
General or IV Anesthesia	-Requires prior authorization -Covered only when medically necessary	
<i>Orthodontia:</i>		
Orthodontia	-Requires prior authorization -Children up through age 20 -HealthCheck referral required -Covered only in cases of severe malocclusion	-Adult orthodontia

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The following services are not Wisconsin Medicaid covered services:

- Cast metal base partial denture
- Overlay, cu-sil, duplicate dentures and adjustments.
- Dental implants and transplants.
- Services for purely aesthetic or cosmetic purposes.
- Cast and prefabricated post and core.
- Professional visits including office visits in which no treatment occurs.
- Single unit cast crowns.
- Adult orthodontia.
- Dispensing of drugs.
- Adjunctive periodontal services.
- Alveoplasty, vestibuloplasty, and most osteoplasty.
- Non-surgical medical or dental treatment for a TMJ condition.
- Service for which prior authorization was denied.

Copayment

Copayments are an important part of reimbursement for dental services. Recipients are encouraged to make every effort to pay their copayment.